



A CUP OF HEALTH WITH CDC ***Get Your Mammogram!***

*(Use of Mammograms Among Women Aged >40 Years ---
United States, 2000—2005)*

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[Announcer] This podcast is presented by the Centers for Disease Control and Prevention. CDC – safer, healthier people.

[Matthew Reynolds] Welcome to *A Cup of Health with CDC*, a weekly broadcast of the MMWR, the Morbidity and Mortality Weekly Report. I'm your host, Matthew Reynolds. Suicide is the fourth leading cause of death among Americans between the ages of 10 and 64. A suicide affects more than the victim. Friends and family often have feelings of anger, guilt, and depression after a suicide. More people survive suicide attempts than actually die. Many survivors require costly medical care and some are severely disabled. Drug and alcohol abuse is one of several factors that can put a person at risk of committing or attempting suicide. Information about suicides is recorded in the National Violent Death Reporting System. CDC scientists use the information in this database to learn more about the role drugs and alcohol play in suicide. Here to discuss this deadly intersection is Dr. Debra Karch of CDC's Division of Violence Prevention. Welcome to the show, Dr. Karch.

[Dr. Karch] Thank you, Matthew. It's great to be here.

[Matthew Reynolds] Dr. Karch, how many people die from suicide each year?

[Dr. Karch] In 2004, more than 32,000 people in the United States took their own lives. That's about 89 people a day. The 32,000 compares to about 17,000 homicide deaths and 45,000 traffic fatalities in the same year. So you can see that suicide is a serious public health problem.

[Matthew Reynolds] Well, what do we know about these victims?

[Dr. Karch] The National Violent Death Reporting System, which is the source of information for our study, currently collects detailed information in 17 participating states on all violent deaths, including suicide. The alcohol and drug test results are just one of the categories of data collected from the medical examiner or coroner reports. Information is also collected from death certificates and from police reports and then it's linked in a single incident. By using information collected in the national reporting system, we're developing a much better understanding of suicide deaths.

[Matthew Reynolds] Are alcohol and drug tests done on all suicide victims?

[Dr. Karch] Some states test nearly all suicide victims and other states test much smaller numbers. Each state, or the medical examiner or coroner's office in that state, decides who they are going to test and what they will test for. The decision to test may be based on the circumstances of a suicide or the particular state or county policies. Deciding to test may also depend on whether the state has money to pay for that testing.

[Matthew Reynolds] Well, when the tests are actually done, how often are alcohol and drugs found in suicide victims?

[Dr. Karch] When tests are done, alcohol is found in more than one out of three suicide victims. Opiates – which include heroin and prescription pain killers – were found in one of six suicide victims tested. Cocaine, amphetamines, and marijuana were found a little less often.

[Matthew Reynolds] What are the differences in alcohol and drugs found in suicide victims who die from an overdose compared to those who use other methods like firearms or knives?

[Dr. Karch] In 2004, suicide by drug overdose accounted for nearly one in five of suicides that occurred. Opiates were found more often in victims who committed suicides by a drug overdose. Almost four out of ten people who died of a drug overdose tested positive for opiates. In those who committed suicide using some other method, opiates were found in only about one out of ten of the suicide victims tested. Alcohol, amphetamines, cocaine, and marijuana were found in nearly the same number tested whether they died of a drug overdose or some other method of suicide.

[Matthew Reynolds] What does the increase in opiates suggest?

[Dr. Karch] Well, simply that opiates are a common method for people to use if they are going to attempt suicide by overdose. This suggests that it may be helpful for physicians to screen patients to determine whether they may be at risk for suicide when patients are being treated with prescription opiates.

[Matthew Reynolds] Why is drug testing information so valuable?

[Dr. Karch] Alcohol and drug test results can be linked to other information about the victims, such as age, sex, marital status, method of suicide, and even the circumstances that existed before the suicide occurred. This information helps researchers understand how alcohol and drugs may contribute to suicide and how to identify people who may be at greater risk. A better understanding of those factors can help programs provide needed support services and prevention strategies.

[Matthew Reynolds] What should a person do if they – or a friend or family member, for that matter – are worried about suicide?

[Dr. Karch] Signs of suicide should be taken very seriously. Our program here is too short to really talk about all the ways that someone can help prevent suicide, but we can stress how important it is to get help. A good place to start is to call the National Suicide Prevention Lifeline at 1-800-273-TALK or 1-800-273-8255. Many states and communities also have crisis support and suicide prevention programs and a call to the National Suicide Prevention Lifeline is a good first step in finding out about those programs in your own community.

[Matthew Reynolds] Thanks, Dr. Karch, for taking the time to talk to us today.

[Dr. Karch] It was my pleasure.

[Matthew Reynolds] That's it for this week's show. Don't forget to join us next week. Until then, be well. This is Matthew Reynolds for *A Cup of Health with CDC*.

[Announcer] To access the most accurate and relevant health information that affects you, your family, and your community, please visit www.cdc.gov.